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PTO/SB/01 (10-00)
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| | | |
|---|------------------------|---------------------------|
| DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) | Attorney Docket Number | END-5311 |
| | First Named Inventor | Inder Raj S. Makin et al. |
| | COMPLETE IF KNOWN | |
| | Application Number | 10/825,952 |
| | Filing Date | April 16, 2004 |
| | Group Art Unit | 3737 |
| Examiner Name | | |

As a below named inventor, I hereby declare that:
My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MEDICAL SYSTEM HAVING A MULTI-TRANSDUCER ULTRASOUND TRANSDUCER ASSEMBLY
(Title of the Invention)

the specification of which

☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **April 16, 2004** as United States Application Number or PCT International Application Number
10/825,952 and was amended on (MM/DD/YYYY)

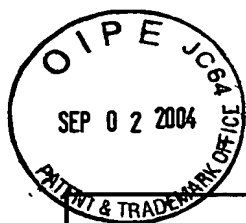
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO |
|---|---------|-------------------------------------|--|--|
| | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



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| Application Serial No. | Filing Date | Status |
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| | | Patented Patented Patented |

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
Label Here

AND

☒ Practitioner(s) named below:

Name
Douglas Erickson,
Mark Levy

Registration Number
29, 530
27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
PO Box 8801
Dayton, Ohio 45401-8801
Tel 937-443-6600

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Direct all correspondence to: ☒ Customer Number **000027777** OR ☐ Correspondence address below

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Address:

City:

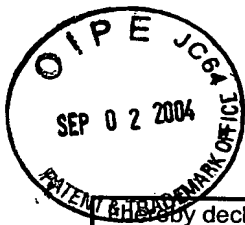
State:

ZIP

Country

Telephone:

Fax: (513) 337-8489



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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

Mailing Address 11388 Donwiddle Drive

City Loveland

State OH

ZIP 45140

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Michael H.

Family Name
or Surname Slayton

Inventor's
Signature

Date

Residence: City Tempe

State AZ

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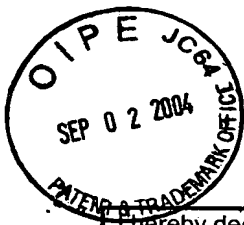
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NAME OF FOURTH INVENTOR:

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Given Name
(first and middle [if any]) Peter G.

Family Name
or Surname Barthe

Inventor's
Signature

Date

13 August 2004

Residence: City Phoenix

State AZ

Country USA

Citizenship USA

Mailing Address 4818-1 E. Hazel Drive

City Phoenix

State AZ

ZIP 85044

Country USA

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(first and middle [if any]) Jeffrey D.

Family Name
or Surname Messerly

Inventor's
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Date

Residence: City Cincinnati

State OH

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Citizenship USA

Mailing Address 2181 Telegraph Court

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State OH

ZIP 45244-4116

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Waseem

Family Name
or Surname Faidi

Inventor's
Signature

Date

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

Mailing Address 702 Solomon Avenue

City Clifton Park

State NY

ZIP 12065

Country USA



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Given Name
(first and middle [if any]) Megan M.

Family Name
or Surname Runk

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 8920 Spooky Ridge Lane

City Cincinnati

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ZIP 45242

Country USA

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Label Here

AND

☒ Practitioner(s) named below:

Name

Douglas Erickson,
Mark Levy

Registration Number

29, 530
27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
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City:

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ZIP

Country

Telephone:

Fax: (513) 337-8489



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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Inder Raj S. Makin

Date

August 13, 2004

Residence: City Loveland

State OH

Country USA

Citizenship USA

Mailing Address 11388 Donwiddle Drive

City Loveland

State OH

ZIP 45140

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Michael H.

Family Name
or Surname Slayton

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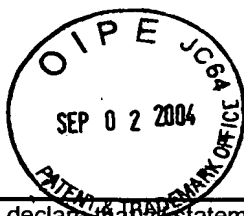
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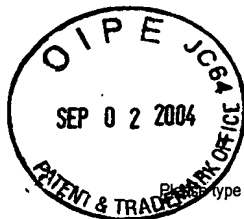
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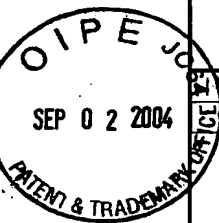
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Country USA

Citizenship USA

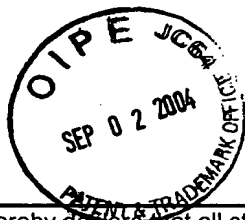
Mailing Address 1323 E. Whalers Way

City Tempe

State AZ

ZIP 85283-2149

Country USA



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| | | | |
|---|-----------------|---|------------------------|
| NAME OF FOURTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Peter G. | | Family Name or Surname Barthe | |
| Inventor's Signature | | Date | |
| Residence: City Phoenix | State AZ | Country USA | Citizenship USA |
| Mailing Address 4818-1 E. Hazel Drive | | | |
| City Phoenix | State AZ | ZIP 85044 | Country USA |

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| | | | |
|---|-----------------|---|------------------------|
| NAME OF FIFTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Jeffrey D. | | Family Name or Surname Messerly | |
| Inventor's Signature | | Date | |
| Residence: City Cincinnati | State OH | Country USA | Citizenship USA |
| Mailing Address 2181 Telegraph Court | | | |
| City Cincinnati | State OH | ZIP 45244-4116 | Country USA |

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| | | | |
|---|-----------------|---|---------------------------|
| NAME OF SIXTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Waseem | | Family Name or Surname Faidi | |
| Inventor's Signature | | Date | |
| Residence: City Clifton Park | State NY | Country USA | Citizenship Jordan |
| Mailing Address 702 Solomon Avenue | | | |
| City Clifton Park | State NY | ZIP 12065 | Country USA |

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NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Megan M.

Family Name
or Surname Runk

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 8920 Spooky Ridge Lane

City Cincinnati

State OH

ZIP 45242

Country USA

336606



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

| DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | | Attorney Docket Number | END-5311 | |
|--|---------|-------------------------------------|--|--|
| <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) | | First Named Inventor | Inder Raj S. Makin et al. | |
| | | COMPLETE IF KNOWN | | |
| | | Application Number | 10/825,952 | |
| | | Filing Date | April 16, 2004 | |
| | | Group Art Unit | 3737 | |
| | | Examiner Name | | |
| As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: | | | | |
| MEDICAL SYSTEM HAVING A MULTI-TRANSDUCER ULTRASOUND TRANSDUCER ASSEMBLY (Title of the Invention) | | | | |
| the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) <u>April 16, 2004</u> as United States Application Number or PCT International Application Number <u>10/825,952</u> and was amended on (MM/DD/YYYY) <input type="text"/> | | | | |
| I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. | | | | |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. | | | | |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO |
| | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | |



DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | |
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| Application Serial No. | Filing Date | Status |
|------------------------|-------------|----------------------------------|
| | | Patented Patented Patented |

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
Label Here

AND

☒ Practitioner(s) named below:

Name
Douglas Erickson,
Mark Levy

Registration Number

29, 530
27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
PO Box 8801
Dayton, Ohio 45401-8801
Tel 937-443-6600

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Direct all correspondence to: ☒ Customer Number **000027777** OR ☐ Correspondence address below

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Address:

City:

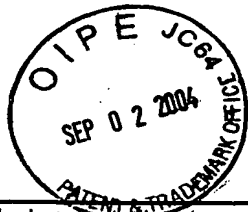
State:

ZIP

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Telephone:

Fax: (513) 337-8489



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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

Mailing Address 11388 Donwiddle Drive

City Loveland

State OH

ZIP 45140

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Michael H.

Family Name
or Surname Slayton

Inventor's
Signature

Date

Residence: City Tempe

State AZ

Country USA

Citizenship USA

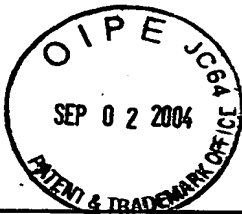
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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Peter G.

Family Name
or Surname Barthe

Inventor's
Signature

Date

Residence: City Phoenix

State AZ

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Citizenship USA

Mailing Address 4818-1 E. Hazel Drive

City Phoenix

State AZ

ZIP 85044

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Jeffrey D.

Family Name
or Surname Messerly

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 2181 Telegraph Court

City Cincinnati

State OH

ZIP 45244-4116

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Waseem

Family Name
or Surname Faidi

Inventor's
Signature

Date

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

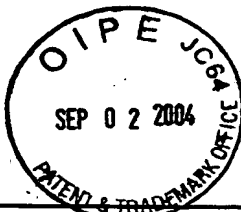
Mailing Address 702 Solomon Avenue

City Clifton Park

State NY

ZIP 12065

Country USA



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NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Megan M.

Family Name
or Surname Runk

Inventor's
Signature *Megan Runk*

Date *Aug 16, 2004*

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 8920 Spooky Ridge Lane

City Cincinnati

State OH

ZIP 45242

Country USA

336606



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| DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | | Attorney Docket Number | END-5311 | |
|--|---------|----------------------------------|--|--|
| | | First Named Inventor | Inder Raj S. Makin et al. | |
| <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) | | COMPLETE IF KNOWN | | |
| | | Application Number | 10/825,952 | |
| | | Filing Date | April 16, 2004 | |
| | | Group Art Unit | 3737 | |
| | | Examiner Name | | |
| As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: MEDICAL SYSTEM HAVING A MULTI-TRANSDUCER ULTRASOUND TRANSDUCER ASSEMBLY <i>(Title of the Invention)</i> the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) April 16, 2004 as United States Application Number or PCT International Application Number 10/825,952 and was amended on (MM/DD/YYYY) <input type="text"/> I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO |
| | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | |



DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | |
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| Application Serial No. | Filing Date | Status |
|------------------------|-------------|----------------------------------|
| | | Patented Patented Patented |

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000027777

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Number Bar Code
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AND



Practitioner(s) named below:

Name

Douglas Erickson,
Mark Levy

Registration Number

29, 530
27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
PO Box 8801
Dayton, Ohio 45401-8801
Tel 937-443-6600

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Direct all correspondence to: ☒ Customer Number ☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

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Address:

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State:

ZIP

Country

Telephone:

Fax: (513) 337-8489



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NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

Mailing Address 11388 Donwiddle Drive

City Loveland

State OH

ZIP 45140

Country USA

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NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

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NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Michael H.

Family Name
or Surname Slayton

Inventor's
Signature

Date

Residence: City Tempe

State AZ

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Citizenship USA

Mailing Address 1323 E. Whalers Way

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Signature

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NAME OF FIFTH INVENTOR:

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or Surname Faidi

Inventor's
Signature

Date

Residence: City Clifton Park

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Citizenship Jordan

Mailing Address 702 Solomon Avenue

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State NY

ZIP 12065

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| | | Examiner Name | | |
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| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO |
| | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
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AND

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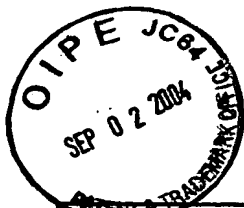
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Address:

City:

State:

ZIP



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Inder Raj S.

Family Name
or Surname Makin

Inventor's
Signature

Date

Residence: City Loveland

State OH

Country USA

Citizenship USA

Mailing Address 11388 Donwiddle Drive

City Loveland

State OH

ZIP 45140

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) T. Douglas

Family Name
or Surname Mast

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 3907 Lansdowne Avenue

City Cincinnati

State OH

ZIP 45236

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Michael H.

Family Name
or Surname Slayton

Inventor's
Signature

Date

Residence: City Tempe

State AZ

Country USA

Citizenship USA

Mailing Address 1323 E. Whalers Way

City Tempe

State AZ

ZIP 85283-2149

Country USA



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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Peter G.

Family Name
or Surname Barthe

Inventor's
Signature

Date

Residence: City Phoenix

State AZ

Country USA

Citizenship USA

Mailing Address 4818-1 E. Hazel Drive

City Phoenix

State AZ

ZIP 85044

Country USA

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Jeffrey D.

Family Name
or Surname Messerly

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 2181 Telegraph Court

City Cincinnati

State OH

ZIP 45244-4116

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Waseem

Family Name
or Surname Faidi

Inventor's
Signature

Date

8/12/04

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

Mailing Address 702 Solomon Avenue

City Clifton Park

State NY

ZIP 12065

Country USA



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NAME OF SEVENTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Megan M.

Family Name
or Surname Runk

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 8920 Spooky Ridge Lane

City Cincinnati

State OH

ZIP 45242

Country USA

336606



Please type a plus sign (+) inside this box ☐

PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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| | | | | | |
|--|--------------------------|---|--|--|--|
| DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR | Attorney Docket Number | END-5311 | | | |
| | First Named Inventor | Inder Raj S. Makin et al. | | | |
| | COMPLETE IF KNOWN | | | | |
| | Application Number | 10/825,952 | | | |
| | Filing Date | April 16, 2004 | | | |
| | Group Art Unit | 3737 | | | |
| | Examiner Name | | | | |
| As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: MEDICAL SYSTEM HAVING A MULTI-TRANSDUCER ULTRASOUND TRANSDUCER ASSEMBLY <i>(Title of the Invention)</i> the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> was filed on (MM/DD/YYYY) April 16, 2004 as United States Application Number or PCT International Application Number 10/825,952 and was amended on (MM/DD/YYYY) <input type="text"/> I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? YES NO | |
| | | | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |
| <input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | | |



DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | |
|-----------------------|--------------------------|--|
| | | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

| Application Serial No. | Filing Date | Status |
|------------------------|-------------|----------------------------------|
| | | Patented Patented Patented |

I hereby appoint:

☒ Practitioners at Customer Number **000027777** →

Place Customer
Number Bar Code
Label Here

AND

☒ Practitioner(s) named below:

Name

Douglas Erickson,

Mark Levy

Registration Number

29, 530

27, 922

C/O Thompson Hine, LLP
2900 Courthouse Plaza NE
PO Box 8801
Dayton, Ohio 45401-8801
Tel 937-443-6600

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Verne E. Kreger, Jr. at telephone number (513) 337-3295.

Direct all correspondence to: ☒ Customer Number **000027777** OR ☐ Correspondence address below

Name:

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Address:

City:

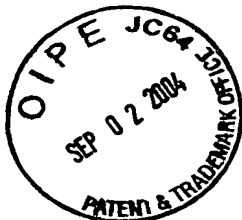
State:

ZIP

Country

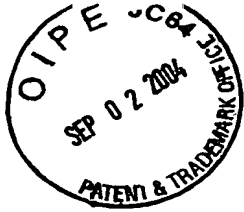
Telephone:

Fax: (513) 337-8489



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| | | | |
|---|-----------------|---|------------------------|
| NAME OF SOLE OR FIRST INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Inder Raj S. | | Family Name or Surname Makin | |
| Inventor's Signature | | Date | |
| Residence: City Loveland | State OH | Country USA | Citizenship USA |
| Mailing Address 11388 Donwiddle Drive | | | |
| City Loveland | State OH | ZIP 45140 | Country USA |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF SECOND INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) T. Douglas | | Family Name or Surname Mast | |
| Inventor's Signature | | Date | |
| Residence: City Cincinnati | State OH | Country USA | Citizenship USA |
| Mailing Address 3907 Lansdowne Avenue | | | |
| City Cincinnati | State OH | ZIP 45236 | Country USA |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | |
| NAME OF THIRD INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Michael H. | | Family Name or Surname Slayton | |
| Inventor's Signature | | Date | |
| Residence: City Tempe | State AZ | Country USA | Citizenship USA |
| Mailing Address 1323 E. Whalers Way | | | |
| City Tempe | State AZ | ZIP 85283-2149 | Country USA |



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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Peter G.

Family Name
or Surname Barthe

Inventor's
Signature

Date

Residence: City Phoenix

State AZ

Country USA

Citizenship USA

Mailing Address 4818-1 E. Hazel Drive

City Phoenix

State AZ

ZIP 85044

Country USA

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Jeffrey D.

Family Name
or Surname Messerly

Inventor's
Signature

Date

Residence: City Cincinnati

State OH

Country USA

Citizenship USA

Mailing Address 2181 Telegraph Court

City Cincinnati

State OH

ZIP 45244-4116

Country USA

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Waseem

Family Name
or Surname Faidi

Inventor's
Signature

Date

Residence: City Clifton Park

State NY

Country USA

Citizenship Jordan

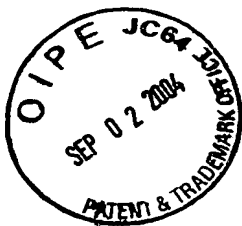
Mailing Address 702 Solomon Avenue

City Clifton Park

State NY

ZIP 12065

Country USA



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| | | | |
|---|-----------------|---|------------------------|
| NAME OF SEVENTH INVENTOR: | | <input type="checkbox"/> A petition has been filed for this unsigned inventor | |
| Given Name (first and middle [if any]) Megan M. | | Family Name or Surname Runk | |
| Inventor's Signature | | Date | |
| Residence: City Cincinnati | State OH | Country USA | Citizenship USA |
| Mailing Address 8920 Spooky Ridge Lane | | | |
| City Cincinnati | State OH | ZIP 45242 | Country USA |

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